

**GOVERNMENT OF THE DISTRICT OF COLUMBIA  
DEPARTMENT ON DISABILITY SERVICES**



<b>POLICY</b>	
Department on Disability Services	Subject: Provider Certification Review
Responsible Program or Office: Quality Management Division	Policy Number: 2013-DDS-POL013
Date of Approval by the Director: December 16, 2014	Number of Pages: 5
Effective Date: January 1, 2015	Expiration Date, if Any: N/A
Supersedes Policy (Dated): Provider Certification Review (December 3, 2013)	
Cross References, Related Policies and Procedures, and Related Documents: All DDA program policies and procedures and DDA Home and Community-Based Services Waiver rules.	

**1. PURPOSE**

The purpose of this policy is to establish the standards and guidelines by which the Department on Disability Services ("DDS"), Developmental Disabilities Administration ("DDA"), will ensure, via the Provider Certification Review ("PCR") process, that enrolled providers remain qualified to deliver supports and services to people supported through the Home and Community Based Services Waiver ("HCBS") Program in DDA.

**2. APPLICABILITY**

This policy applies to all enrolled HCBS waiver providers that deliver services and supports to those people with intellectual and developmental disabilities receiving services as part of the DDA Service Delivery System funded through the Department of Health Care Finance ("DHCF") under the DDA HCBS waiver program.

**3. AUTHORITY**

The authority for this policy is established in the Department on Disability Services as set forth in D.C. Law 16-264, the "Department on Disability Services Establishment Act of 2006," effective March 14, 2007 (D.C. Official Code § 7-761.01 *et seq.*); D.C. Law 2-137, the "Citizens with Intellectual Disabilities Constitutional Rights and Dignity Act of 1978," effective March 3, 1979 (D.C. Official Code § 7-1301.01 *et seq.*); and Mayor's Order 2009-

120, the "Delegation of Authority Pursuant to D.C. Law 5-48, the 'Health-Care and Community Residence Licensure Act of 1983.'"

#### **4. POLICY**

It is the policy of DDS to ensure that all people receiving supports from the DDA service system have access to and receive quality supports, services, and health care. All enrolled DDA providers delivering residential, respite, in-home, day and vocational HCBS waiver services and supports will undergo the certification process and must meet certification requirements to continue as qualified providers on an on-going basis.

#### **5. RESPONSIBILITY**

The responsibility for implementation of this policy resides with the Director of the Department on Disability Services and the DDS Quality Management Division ("QMD") Director.

#### **6. STANDARDS**

A. All provider organizations contracted through DDS and/or who hold a Medicaid Provider Agreement through DHCF to provide residential, respite, in-home, day and vocational waiver services will be subject to the PCR process. The following is a listing of services subject to PCR:

##### **Residential**

- Residential Habilitation
- Supported Living
- Supported Living Periodic
- Supported Living with Transportation
- Shared Living
- Host Home without transportation
- Respite Care-Daily
- Respite Care-Hourly
- In-Home Supports

##### **Vocational/Day Supports**

- Supported Employment (Intake & Assessment)
- Supported Employment (Job Placement)
- Supported Employment (Job Training and Support)
- Supported Employment (Long Term Follow Along)
- Supported Employment (Small Group)
- Individualized Day Supports
- Day Habilitation
- Day Habilitation 1:1
- Employment Readiness

- B. For all new waiver services of a provider, the first PCR review will be conducted after a provider delivers services for a period of 60 days to evaluate the provider organization's performance in implementing each person's Individual Support Plan and operationalizing the agency's policies and procedures as approved during the provider enrollment process.
- C. The PCR evaluates performance with each distinctive service. As a result, a provider may receive certification for one service and fail to achieve certification in a second, for example.
- D. The PCR process may include, but is not limited to, sampling, document review, observation, and interviews. If the provider does not pass the PCR on the initial review visit, one follow-up review visit will be conducted within 30 to 60 calendar days from the date the provider receives the initial PCR report.
- E. Outcomes measured through the PCR will be used to determine a provider's performance in person-centered outcomes and organizational outcomes.
- F. There are five (5) ratings that may be assigned at the conclusion of the initial review:
  - 1. Excellent
  - 2. Satisfactory
  - 3. Needs Improvement
  - 4. Unsatisfactory
  - 5. Failed
- G. There are three levels of certification that can be achieved as a result of a completed PCR review:
  - 1. Provisional six (6) month certification
  - 2. Annual certification
  - 3. Two year certification
- H. Providers that receive an "Unsatisfactory" or "Needs Improvement" rating for a specific service on the initial PCR review may be subject to one or all of the following:
  - 1. A hold placed on referrals, new transitions and/or admissions to that service.
  - 2. Existing services placed on Enhanced Monitoring per the PCR Guide.
  - 3. Other available sanctions as may be appropriate per DDS policy.
- I. Providers with a history of consecutive ratings on the initial review that are in the "Needs Improvement" and/or "Unsatisfactory" categories will face additional sanctions in subsequent PCR reviews which may include but are not limited to:
  - 1. Being limited to a provisional six month certification after satisfactorily passing a PCR follow-up review.

2. A review of all available quality indicators collected by DDS for the review period in question by the Certification Review Panel prior to completion of the PCR review process. All available quality indicators will be considered in the PCR Certification decision.
  3. When termination of a provider certification is recommended by the Panel, the provider will be placed on Enhanced Monitoring, be closed to new admissions of any kind and will be referred to DHCF for termination of the Provider Agreement for the service(s). No further PCR Reviews will be conducted during the termination proceedings.
  4. When a follow-up PCR review is recommended by the panel and the provider achieves a satisfactory rating at the follow up review, the provider will receive a provisional six month certification.
- J. Providers that receive a “Failed” rating on initial PCR review or “Unsatisfactory” on follow-up review for any service will no longer be deemed a qualified provider for that service by DDS.
- K. The Provider may appeal the PCR results within five (5) business days of the receipt of the report by submitting documentation to refute the findings to the PCR Project Director. The PCR Project Director must respond within ten (10) business days, from receipt of the appeal.
- L. If the provider disagrees with the findings from the PCR Director, the provider may appeal these findings to the QMD Director within five (5) business days of receipt of the findings at the end of the review period. The QMD Director will issue the final administrative decision within ten (10) business days of receipt of the appeal.
- M. DDS submits recommendations for termination of the Medicaid Provider Agreement to DHCF. Following the submission of such a recommendation, all subsequent actions are taken by DHCF.
- N. If a provider is deemed no longer qualified to deliver a service by DDS, the following actions will occur:
1. The service will remain on or be placed on Enhanced Monitoring by DDS.
  2. Certification will not be renewed.
  3. All transitions, referrals and admissions will be held.
  4. The final PCR report for that service will be shared with the person, family members as appropriate, guardians, court-appointed attorney and other substitute decision-makers. Notice will be provided to the person and members of his/her support team that the assigned DDA service coordinator is available to coordinate a transition to a new service provider.
  5. A team meeting will be held if requested to determine if the person/family/guardian would like to choose a new provider, or if the person will remain with the provider pending the results of any administrative appeal of the PCR results.
- O. All PCR results will be published on the DDS/DDA website.

*Laura L. Nuss*

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Laura L. Nuss, Director

*12/16/14*

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Approval Date

